

# Interim Designation of Agent to Receive Notification of Claimed Infringement

Full Legal Name of Service Provider: The Trustees of the California  
State University

Alternative Name(s) of Service Provider (including all names under which the service  
provider is doing business):  
California State University Bakersfield

Address of Service Provider: 401 Golden Shore Long Beach CA 90802-4210

Name of Agent Designated to Receive  
Notification of Claimed Infringement: Wendell Barbour

Full Address of Designated Agent to which Notification Should be Sent (a P.O. Box  
or similar designation is not acceptable except where it is the only address that can be used in the geographic  
location): 9001 Stockdale Highway, Walter Stiern Library - Room 205  
Bakersfield CA 93311-1099

Telephone Number of Designated Agent: (661) 664-3495

Facsimile Number of Designated Agent: (661) 665-6920

Email Address of Designated Agent: wbarbour@csub.edu

Signature of Officer or Representative of the Designating Service Provider:  
Date: May 24, 2001

Typed or Printed Name and Title: Wendell Barbour  
Vice President for Information Resources

**Note: This Interim Designation Must be Accompanied by a \$20 Filing Fee  
Made Payable to the Register of Copyrights.**

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**Interim Designation of Agent to Receive Notification  
of Claimed Infringement**

**Full Legal Name of Service Provider:** The Trustees of the California State University

**Alternative Name(s) of Service Provider (including all names under which the service provider is doing business):** California State University Channel Islands,  
CSU Channel Islands, Cal State Channel Islands, CSUCI

**Address of Service Provider:** One University Drive, Camarillo, CA 93012

**Name of Agent Designated to Receive Notification of Claimed Infringement:** Peter Mosinskis

**Full Address of Designated Agent to which Notification Should be Sent** (a P.O. Box or similar designation is not acceptable except where it is the only address that can be used in the geographic location):  
Peter Mosinskis, Information Technology  
CSU Channel Islands, Camarillo, CA 93012

**Telephone Number of Designated Agent:** 805-437-8552

**Facsimile Number of Designated Agent:** 805-437-8555

**Email Address of Designated Agent:** webmaster@csuci.edu

**Signature of Officer or Representative of the Designating Service Provider:** \_\_\_\_\_  
**Date:** 12/4/03

**Typed or Printed Name and Title:** Munawwar Khan, Associate Vice President for Information Technology

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**Interim Designation of Agent to Receive Notification  
of Claimed Infringement**

**Full Legal Name of Service Provider:** TRUSTEES OF THE CALIFORNIA STATE UNIVERSITY

**Alternative Name(s) of Service Provider (including all names under which the service provider is doing business):** CALIFORNIA STATE UNIVERSITY, FRESNO

**Address of Service Provider:** 2225 E. SAN RAMON, FRESNO, CALIFORNIA 93740

**Name of Agent Designated to Receive Notification of Claimed Infringement:** PATRICK NEWELL

**Full Address of Designated Agent to which Notification Should be Sent** (a P.O. Box or similar designation is not acceptable except where it is the only address that can be used in the geographic location):  
CSU, FRESNO, 5200 NORTH BARTON, MADDEN LIBRARY, ROOM 2035,  
MAILSTOP ML34, FRESNO, CA 93740-8014

**Telephone Number of Designated Agent:** 559-278-6528

**Facsimile Number of Designated Agent:** 559-278-6952

**Email Address of Designated Agent:** pnewell@csufresno.edu

**Signature** \_\_\_\_\_ **ive of the Designating Service Provider:**  
Date: September 30, 2003

**Typed or Printed Name and Title:** DARRELL MARTIN, DIRECTOR (INTERIM),  
INFORMATION TECHNOLOGY SERVICES

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# Interim Designation of Agent to Receive Notification of Claimed Infringement

**Full Legal Name of Service Provider:** Trustees of the California State University

**Alternative Name(s) of Service Provider (including all names under which the service provider is doing business):** California State University, Hayward

**Address of Service Provider:** 25800 Carlos Bee Blvd., Hayward, CA 94542

**Name of Agent Designated to Receive Notification of Claimed Infringement:** Eric Thompson

**Full Address of Designated Agent to which Notification Should be Sent (a P.O. Box or similar designation is not acceptable except where it is the only address that can be used in the geographic location):**

Purchasing Office; California State University, Hayward  
25800 Carlos Bee Blvd., Hayward, CA 94542

**Telephone Number of Designated Agent:** 510/885-3836

**Facsimile Number of Designated Agent:** 510/885-7484

**Email Address of Designated Agent:** ethompso@csuhayward.edu

**Signature of Officer or Representative of the Designating Service Provider:**

**Date:** 5/17/2000

**Typed or Printed Name and Title:** Procurement & Support Services Officer & Risk Manager

**Note: This Interim Designation Must be Accompanied by a \$20 Filing Fee  
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# Amended Interim Designation of Agent to Receive Notification of Claimed Infringement

Full Legal Name of Service Provider: The Trustees of the California State University

Alternative Name(s) of Service Provider (including all names under which the service provider is doing business): California State University, Long Beach

Address of Service Provider: 1250 Bellflower Blvd., Long Beach CA 90840-1006

Name of Agent Designated to Receive Notification of Claimed Infringement: Edwin G McBride

Full Address of Designated Agent to which Notification Should be Sent (a P.O. Box or similar designation is not acceptable except where it is the only address that can be used in the geographic location):

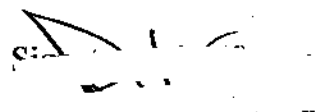
North Campus Center  
1250 Bellflower Blvd., Long Beach CA 90840-1006

Telephone Number of Designated Agent: 562-985-8084

Facsimile Number of Designated Agent: 562-985-5800

Email Address of Designated Agent: emcbride@csulb.edu

Identify the Interim Designation to be Amended, by Service Provider Name and Filing Date, so that it may be Readily Located in the Directory Maintained by the Copyright Office: The Trustees of the California State University 5-17-00

 Representative of the Designating Service Provider:  
Date: May 18, 2000

NO OTHER FILING  
REC'D PER CO FILES

Typed or Printed Name and Title: Karl W. E. Anatol  
Provost and Senior Vice President for Academic Affairs

Note: This Amended Interim Designation Must be Accompanied by a \$20 Filing Fee Made Payable to the Register of Copyrights.

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**Amended Interim Designation of Agent to Receive Notification  
of Claimed Infringement**

**Full Legal Name of Service Provider:**

**The Trustees of the California State University**

**Alternative Name(s) of Service Provider (including all names under which the service provider is doing business):** csupomona.edu + Cal Poly Pomona +  
**California State Polytechnic University, Pomona**

**Address of Service Provider:** 3801 W. Temple Avenue, Pomona, CA 91789

**Name of Agent Designated to Receive**

**Notification of Claimed Infringement:** A. Michael Berman

**Full Address of Designated Agent to which Notification Should be Sent** (a P.O. Box or similar designation is not acceptable except where it is the only address that can be used in the geographic location):

**California State Polytechnic University, Pomona, I&IT Division,  
3801 W. Temple Avenue, Pomona, CA**

**Telephone Number of Designated Agent:** 909-979-6300

**Facsimile Number of Designated Agent:** 909-979-6400

**Email Address of Designated Agent:** dmca@csupomona.edu

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Identify the Interim Designation to be Amended, by Service Provider Name and Filing Date, so that it may be Readily Located in the Directory Maintained by the Copyright Office: **California State Polytechnic University, Pomona, Nov 9 2000**

**Sig** \_\_\_\_\_, representative of the Designating Service Provider:

**Date:** 2/2/2003

**Typed or Printed Name and Title:** A. Michael Berman

**Vice President for Instructional and Information Technology**

**Note: This Amended Interim Designation Must be Accompanied by a \$30 Filing Fee Made Payable to the Register of Copyrights.**

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## Amended Interim Designation of Agent to Receive Notification of Claimed Infringement

Full Legal Name of Service Provider: The Trustees of the California State University

Alternative Name(s) of Service Provider (including all names under which the service provider is doing business): California State University, San Bernardino

Address of Service Provider: 5500 University Parkway  
San Bernardino, CA 92407

Name of Agent Designated to Receive Notification of Claimed Infringement: Dr. William Aguilar

Full Address of Designated Agent to which Notification Should be Sent (a P.O. Box or similar designation is not acceptable except where it is the only address that can be used in the geographic location):  
5500 University Parkway, PL-2006, San Bernardino, CA 92407

Telephone Number of Designated Agent: (909)880-5099

Facsimile Number of Designated Agent: (909)880-7046

Email Address of Designated Agent: Copyright-agent@csusb.edu

Identify the Interim Designation to be Amended, by Service Provider Name and Filing Date, so that it may be Readily Located in the Directory Maintained by the Copyright Office: California State University, San Bernardino, Filing Date August 14, 2000

Signature of Representative of the Designating Service Provider:  
Date: 9-19-03

Typed or Printed Name and Title: Dr. William Aguilar  
Vice President, Information Resources & Technology

Note: This Amended Interim Designation Must be Accompanied by a \$30 Filing Fee Made Payable to the Register of Copyrights.

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**Amended Interim Designation of Agent to Receive Notification  
of Claimed Infringement**

**Full Legal Name of Service Provider:** The Trustees of The California State University

**Alternative Name(s) of Service Provider (including all names under which the service provider is doing business):** San Diego State University

**Address of Service Provider:** 5500 Campanile Drive, San Diego, CA 92182

**Name of Agent Designated to Receive**

**Notification of Claimed Infringement:** Joseph Vasquez

**Full Address of Designated Agent to which Notification Should be Sent** (a P.O. Box or similar designation is not acceptable except where it is the only address that can be used in the geographic location):

Joseph Vasquez, San Diego State University,

5500 Campanile Drive, San Diego, CA 92182

**Telephone Number of Designated Agent:** (619) 594-6018

**Facsimile Number of Designated Agent:** (619) 594-6022

**Email Address of Designated Agent:** jvasquez@mail.sdsu.edu

Identify the Interim Designation to be Amended, by Service Provider Name and Filing Date, so that it may be Readily Located in the Directory Maintained by the Copyright

Office: San Diego State University, filed approximately April 14, 2000

**Signature of Officer or Representative of the Designating Service Provider:**

Date: 9/25/00

**Typed or Printed Name and Title:** Joseph Vasquez, Associate Vice President,  
Business Enterprises

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**Interim Designation of Agent to Receive Notification  
of Claimed Infringement**

**Full Legal Name of Service Provider:** The Trustees of the California State University

**Alternative Name(s) of Service Provider (including all names under which the service provider is doing business):** California State University San Marcos

**Address of Service Provider:** 333 S. Twin Oaks Valley Road, San Marcos, CA 92096

**Name of Agent Designated to Receive  
Notification of Claimed Infringement:** Teresa Macklin

**Full Address of Designated Agent to which Notification Should be Sent** (a P.O. Box or similar designation is not acceptable except where it is the only address that can be used in the geographic location):  
Teresa Macklin, Academic Computing Services, CSU San Marcos, San Marcos, CA 92096

**Telephone Number of Designated Agent:** 760-750-4787

**Facsimile Number of Designated Agent:** 760-750-3257

**Email Address of Designated Agent:** macklin@csusm.edu

**Signature of Officer or Representative of the Designating Service Provider:**

**Date:** 5-17-00

**Typed or Printed Name and Title:** Teresa Macklin, Director, Academic Computing Services

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# Interim Designation of Agent to Receive Notification of Claimed Infringement

**Full Legal Name of Service Provider:** The Trustees of the California State University

**Alternative Name(s) of Service Provider (including all names under which the service provider is doing business):** California State University, Stanislaus  
CSU, Stanislaus

**Address of Service Provider:** 801 W. Monte Vista Ave., Turlock, CA 95382

**Name of Agent Designated to Receive Notification of Claimed Infringement:** Ms. Maithreyi Manoharan

**Full Address of Designated Agent to which Notification Should be Sent** (a P.O. Box or similar designation is not acceptable except where it is the only address that can be used in the geographic location):

Office of Information Technology, CSU Stanislaus  
801 W. Monte Vista Avenue, Turlock, CA 95382

**Telephone Number of Designated Agent:** (209) 667-3137

**Facsimile Number of Designated Agent:** (209) 667-3333

**Email Address of Designated Agent:** MManoharan@stan.csustan.edu

**Signature of Officer or Representative of the Designating Service Provider:**

**Date:** 4/30/01

**Typed or Printed Name and Title:** Dr. Richard Curry  
Provost and Vice President for Academic Affairs

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**Interim Designation of Agent to Receive Notification  
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**Full Legal Name of Service Provider:** The Trustees of the California State University

**Alternative Name(s) of Service Provider (including all names under which the service provider is doing business):** San Jose State University

**Address of Service Provider:** One Washington Square, San Jose, CA 95192-0013

**Name of Agent Designated to Receive  
Notification of Claimed Infringement:** R. Bruce Judd

**Full Address of Designated Agent to which Notification Should be Sent** (a P.O. Box or similar designation is not acceptable except where it is the only address that can be used in the geographic location):

San Jose State University, One Washington Square, San Jose, CA 95192-0013

Attn: R. Bruce Judd

**Telephone Number of Designated Agent:** 408-924-2290

**Facsimile Number of Designated Agent:** 408-924-1018

**Email Address of Designated Agent:** bruce.judd@sjsu.edu

**Signature of Officer or Representative of the Designating Service Provider:**

**Date:** April 9, 2003

**Typed or Printed Name and Title:** R. Bruce Judd

Assoc. Vice President, University Computing And  
Telecommunications

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